

**CHAPTER 13 PLAN
UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF MISSISSIPPI**

Debtor: Lawrence Wills SSN: XXX-XX-9570 CASE NO. 16-13580
Joint Debtor: _____ SSN: XXX-XX- Median Income: Above Below
Address: Post Office Box 116
Darling, MS 38623

THIS PLAN DOES NOT ALLOW CLAIMS. Creditors must file a proof of claim to be paid under any plan that may be confirmed. The treatment of ALL secured and priority debts must be provided for in this plan.

PAYMENT AND LENGTH OF PLAN

The plan period shall be for a period of 60 months, not to be less than 36 months for below median income debtor(s), or less than 60 months for above median income debtor(s).

(A) Debtor shall pay \$ 1,100.00 (monthly, semi-monthly, weekly, or bi-weekly) to the chapter 13 trustee. Unless otherwise ordered by the Court, an Order directing payment shall be issued to Debtor's employer at the following address:

Plan payments deducted from bank account.

First plan payment deduction is on 11/5/16.

The debtor is retired.

(B) Joint Debtor shall pay \$ _____ (monthly, semi-monthly, weekly, or bi-weekly) to the chapter 13 trustee. Unless otherwise ordered by the Court, an Order directing payment shall be issued to Debtor's employer at the following address:

PRIORITY CREDITORS.

Filed claims which are not disallowed are to be paid in full or as ordered by the Court as follows:

Internal Revenue Service: \$ _____ at \$ _____/month

Mississippi Dept. of Revenue: \$ _____ at \$ _____/month

Other/_____: \$ _____ at \$ _____/month

DOMESTIC SUPPORT OBLIGATION. DUE TO:

Mary ~~W~~ ALLEN RECCA

11 Seneca Circle

Goosecreek, SC 29445

POST PETITION OBLIGATION: In the amount of \$ 1,462.42 per month beginning October 2016.

To be paid direct, through payroll deduction, or through the plan.

Retirement

PRE-PETITION ARREARAGE: In the total amount of \$ _____ through _____ which shall be paid in

the amount of \$ _____ per month beginning _____.

To be paid Direct, through payroll deduction, or through the plan.

HOME MORTGAGES. All claims secured by real property which are to be paid through the plan shall be scheduled below. Absent an objection by a party in interest, the plan will be amended consistent with the proof of claim filed herein, subject to the start date for the continuing monthly mortgage payment proposed herein.

Mtg pmts to _____ Beginning _____ @ \$ _____ Plan Direct
Mtg pmts to Clear Springs-2nd mtg Beginning 10/2016 @ \$ 319.40 Plan Direct
Mtg pmts to (no arrearage) Beginning _____ @ \$ _____ Plan Direct

Mtg arrears to _____ Through _____ \$ _____ @ \$ _____ /mo
Mtg arrears to Clear Springs-2nd mtg Through _____ \$ _____ @ \$ _____ /mo
Mtg arrears to (no arrearage) Through _____ \$ _____ @ \$ _____ /mo

Debtor's Initials _____

Joint Debtor's Initials _____

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MORTGAGE CLAIMS TO BE PAID IN FULL OVER PLAN TERM:

Creditor: Ocwen - 1st mortgage Approx. amt. due: \$10,675.80 Int. Rate: 5
Property Address: 189 Fox Road, Marks, MS Are related taxes and/or insurance escrowed Yes No

Creditor: _____ Approx. amt. due: _____ Int. Rate: _____
Property Address: _____ Are related taxes and/or insurance escrowed Yes No

NON-MORTGAGE SECURED CLAIMS. Creditors that have filed claims that are not disallowed are to retain lien(s) pursuant to 11 U.S.C. § 1325(a)(5)(B)(i)(I) until the payment of the debt determined as under non-bankruptcy law or discharge. Such creditors shall be paid as secured claimants the sum set out below or pursuant to other order of the Court. The portion of the claim not paid as secured shall be treated as a general unsecured claim.

CREDITOR'S NAME	COLLATERAL	910* CLM	APPROX. AMT. OWED	INT. RATE	PAY VALUE OR AMT. OWED
Wells Fargo Dealer Service	2013 Honda (not 910 vehicle)		\$24,980.00	\$21,000.00	5
Nissan	2013 Nissan (not 910 vehicle) daughter uses school		\$20,792.59	\$20,000.00	5

* The column for "910 CLM" applies to both motor vehicles and "any other thing of value" as used in the "hanging paragraph" of 11 U.S.C. § 1325

SPECIAL CLAIMANTS including, but not limited to, co-signed debts, abandonment of collateral, direct payments by Debtor, etc. For all abandoned collateral Debtor will pay \$0.00 on the secured portion of the debt. Where the proposal is for payment, creditor must file a proof of claim to receive proposed payment.

CREDITOR'S NAME	COLLATERAL	APPROX. AMT. OWED	PROPOSED TREATMENT

STUDENT LOANS which are not subject to discharge pursuant to 11 U.S.C. §§ 523(a)(8) and 1328(c) are as follows (such debts shall not be included in the general unsecured total):

CREDITOR'S NAME	APPROX. AMT. OWED	CONTRACTUAL MO. PMT.	PROPOSED TREATMENT

SPECIAL PROVISIONS which may apply to any or all payments to be paid through the plan, including, but not limited to, adequate protection payments:

The Escrow for taxes and insurance is direct by the debtor outside the plan.

Financial Management Certificate has been filed with the Court. See docket number 7

GENERAL UNSECURED CLAIMS total approximately \$ _____. Such claims must be **timely filed** and not disallowed to receive payment as follows: ____ IN FULL (100%), ____ 0 %(percent) MINIMUM, or a total distribution of \$ _____, with the Trustee to determine the percentage distribution. **Those general unsecured claims not timely filed shall be paid nothing, absent order of the Court.**

Debtor's Initials _____

Joint Debtor's Initials _____

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Total attorney fee charged: \$ 3,200.00
Attorney fee previously paid: \$ 307.00
Attorney fee to be paid in plan: \$ 2,893.00

The payment of administrative costs and aforementioned attorney fees are to be paid pursuant to Court order and/or local rules.

Automobile Insurance Co/Agent

Attorney for Debtor (Name/Address/Phone/Email)
John M. Sherman
Post Office Box 1900
Clarksdale, MS 38614

Telephone/Fax:

Telephone No. 662-627-5301
Facsimile No. 662-627-5315
Email address Jsher203@bellsouth.net

DATED: 10/21/2016

DEBTOR'S SIGNATURE

/s/ Lawrence Wills

JOINT DEBTOR'S SIGNATURE

ATTORNEY'S SIGNATURE

/s/ John M. Sherman